

FEC
FORM 3

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

16 MAY 31 PM 12:32

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

William Tarbell Campaign

ADDRESS (number and street)

1344 Disc Dr #275



Check if different
than previously
reported. (ACC)

Sparks

NV

89436

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

3. IS THIS
REPORT



NEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

NV

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)

General (12G)

Runoff (12R)



Convention (12C)



Special (12S)

Election on

06

14

2016

in the
State of

NV

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

05

25

2016

in the
State of

5. Covering Period

07

22

2015

through

05

25

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Nadine L. Phinney

Signature of Treasurer

Nadine L. Phinney

Date

05

26

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

William Tarbell Campaign

Report Covering the Period:

From:

07/22/2015

To:

05/25/2016

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))...	165,000	165,000
(b) Total Contribution Refunds (from Line 20(d))..	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	165,000	165,000
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	41,548.47	41,548.47
(b) Total Offsets to Operating Expenditures (from Line 14)...	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	41,548.47	41,548.47
8. Cash on Hand at Close of Reporting Period (from Line 27)...	0	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)...	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)...	41,383.47	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

William Tarbell Campaign

Report Covering the Period:

From:

MM / DD / YYYY
07 / 22 / 2015

To:

MM / DD / YYYY
05 / 25 / 2016

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A)...

(ii) Unitemized

(iii) TOTAL of contributions from individuals .

(b) Political Party Committees...

(c) Other Political Committees (such as PACs)...

(d) The Candidate

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

0
165 00
165 00
0
0
165 00

0
165 00
165 00
0
0
165 00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

0

0

13. LOANS:

(a) Made or Guaranteed by the Candidate...

(b) All Other Loans...

(c) TOTAL LOANS (add Lines 13(a) and (b))...

41383 47
0
41383 47

41383 47
0
41383 47

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..

0

0

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0

0

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...

41548 47

41548 47

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES...

4,154.847

4,154.847

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES ..

0

0

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed
by the Candidate...

0

0

(b) Of All Other Loans

0

0

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b))...

0

0

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees ...

0

0

(b) Political Party Committees...

0

0

(c) Other Political Committees
(such as PACs) ...

0

0

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c))...

0

0

21. OTHER DISBURSEMENTS...

0

0

22. TOTAL DISBURSEMENTS

(add Lines 17, 18, 19(c), 20(d), and 21) ►

4,154.847

4,154.847

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...

0

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...

4,154.847

25. SUBTOTAL (add Line 23 and Line 24)...

4,154.847

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...

4,154.847

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25)...

0.0

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE **5** OF **15**

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

William Tarbell Committee

Full Name (Last, First, Middle Initial)

A. No itemized receipts

Mailing Address

Date of Receipt

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Amount of Each Receipt this Period

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.
Mailing Address

Date of Receipt

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Amount of Each Receipt this Period

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.
Mailing Address

Date of Receipt

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Amount of Each Receipt this Period

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

201605310200190944

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE **6** OF **15**

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

William Tarbell Campaign

Full Name (Last, First, Middle Initial)

Date of Disbursement

07 / **23** / **2015**

A. Sindex Printing & Graphics

Mailing Address **1550 Linda Way**

City **Sparks** State **NV** Zip Code **89431**

Amount of Each Disbursement this Period

80 79

Purpose of Disbursement

Business cards

006

Candidate Name

William P. Tarbell

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

09 / **23** / **2015**

B. Sindex Printing & Graphics

Mailing Address

1550 Linda Way

City **Sparks** State **NV** Zip Code **89431**

Amount of Each Disbursement this Period

430 90

Purpose of Disbursement

Door magnet signs

006

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: **NV**

District:

Date of Disbursement

10 / **01** / **2015**

C. Sindex Printing & Graphics

Mailing Address

1550 Linda Way

City **Sparks** State **NV** Zip Code **89436**

Amount of Each Disbursement this Period

1311 80

Purpose of Disbursement

Vehicle wrap

006

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Memo Item

SUBTOTAL of Disbursements This Page (optional)

1,823.49

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 15

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

William Tarbell Campaign

Full Name (Last, First, Middle Initial)

D. Sindex Printing & Graphics

Mailing Address

1550 Linda Way

City

Sparks

State
NV

Zip Code

89436

Purpose of Disbursement

Postcards & Flyers (Gloss Text)

006

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

10 30 2015

Amount of Each Disbursement this Period

226.22

Memo Item

Full Name (Last, First, Middle Initial)

E. Sindex Printing & Graphics

Mailing Address

1550 Linda Way

City

Sparks

State

NV

Zip Code

89431

Purpose of Disbursement

Postcards (1000), Business cards (1000)

006

Candidate Name

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

01 14 2016

Amount of Each Disbursement this Period

166.97

Memo Item

Full Name (Last, First, Middle Initial)

F. Sindex Printing & Graphics

Mailing Address

1550 Linda Way

City

Sparks

State

NV

Zip Code

89431

Purpose of Disbursement

Business Cards (1000)

006

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

03 02 2016

Amount of Each Disbursement this Period

70.02

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

463.21

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 15

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

William Tarbell Campaign

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M / D D / Y Y Y Y
05 / 24 / 2016

Sindex Printing & Graphics

Mailing Address

1550 Linda Way

City

Sparks

State

NV

Zip Code

89431

Amount of Each Disbursement this Period

339.33

Purpose of Disbursement

Business Cards & yard signs

006

Candidate Name

Category/
Type

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M / D D / Y Y Y Y

B.

Mailing Address

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M / D D / Y Y Y Y

C.

Mailing Address

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

339.33

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 15

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

William Tarbell Campaign

Full Name (Last, First, Middle Initial)

A. Nevada Secretary of State

Mailing Address

202 N. Carson St.

City

Carson City

State

NV

Zip Code

89701

Purpose of Disbursement

Filing fee for U.S. Senate

Candidate Name

001

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

03 17 2016

Amount of Each Disbursement this Period

500.00

Memo Item

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

Amount of Each Disbursement this Period

Memo Item

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

500.00

TOTAL This Period (last page this line number only).....▶

, , .

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 15

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

William Tarbell Campaign

Full Name (Last, First, Middle Initial)

A. *Jesse Turner/Teresa Cohen*
Mailing Address *email: jtusa2@gmail.com*
mail: none listed web address: www.jessieturner.org
City *Las Vegas* State *NV* Zip Code
Purpose of Disbursement *Monthly fee for marketing/social media*
Candidate Name *001* Category/Type

Date of Disbursement

11/30/2015

Amount of Each Disbursement this Period

6,000.00

☐ Memo Item

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. *Jessie Turner/Teresa Cohen*
Mailing Address *none listed*
City *Las Vegas* State *NV* Zip Code
Purpose of Disbursement *Dec. monthly fee for marketing/social media*
Candidate Name *001* Category/Type

Date of Disbursement

12/30/2016

Amount of Each Disbursement this Period

6,000.00

☐ Memo Item

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. *Jessie Turner/Teresa Cohen*
Mailing Address *none listed*
City *Las Vegas* State *NV* Zip Code
Purpose of Disbursement *Jan. monthly fee for marketing/social media*
Candidate Name *001* Category/Type

Date of Disbursement

01/30/2016

Amount of Each Disbursement this Period

6,000.00

☐ Memo Item

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

18,000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE **11** OF **15**

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

William Tarbell Campaign

Full Name (Last, First, Middle Initial)

Date of Disbursement

02/30/2016

A. *Jessie Turner/Teresa Cohen*

Mailing Address

none listed

City

Las Vegas

State

NV

Zip Code

Purpose of Disbursement

Feb. monthly fee for marketing/social media

0.01

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Amount of Each Disbursement this Period

6,000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Date of Disbursement

M / / Y Y

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

Date of Disbursement

M D

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

6,000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 15

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

William Tarbell Campaign

Full Name (Last, First, Middle Initial)

A. *Patricia Martinelli-Price*

Mailing Address

5319 Regal Ave

City

Las Vegas

State

NV

Zip Code

89146

Purpose of Disbursement

Marketing & campaign coordination

Candidate Name

007
Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M D D Y Y Y Y
02 18 2016

Amount of Each Disbursement this Period

5,000.00

☐ Memo Item

B. *Patricia Martinelli-Price*

Mailing Address

5319 Regal Ave.

City

Las Vegas

State

NV

Zip Code

89146

Purpose of Disbursement

Marketing & campaign coordination

Candidate Name

007
Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M D D Y Y Y Y
03 04 2016

Amount of Each Disbursement this Period

5,000.00

☐ Memo Item

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M D D Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

10,000.00

201605310200190951

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE **13** OF **15**

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

William Tarbell Campaign

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. *Buckaroo Broadcasting LLC*

M M / D D / Y Y Y Y
05 / 24 / 2016

Mailing Address

335 West 4th Str.

City

Winnemucca, NV

State

Zip Code

89445

Purpose of Disbursement

Radio Advertising

004

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

435.00

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

435.00

41,548.47

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 14 OF 15

FOR LINE NUMBER:
(check only one)

☐ 13a
☐ 13b

NAME OF COMMITTEE (In Full) William Tarbell Campaign

LOAN SOURCE Full Name (Last, First, Middle Initial)

William P. Tarbell, Candidate

☐ Memo Item

Election:

☒ Primary

☐ General

☐ Other (specify) ▼

Mailing Address

1344 Disc Dr. #275

City

Sparks

State

NV

ZIP Code

89436

Original Amount of Loan

41,383.47

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

41,383.47

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM ' DD ' YY YY

02 ' 28 ' 2016

MM ' DD ' YY YY

06 ' 01 ' 2022

00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

SUBTOTALS This Period This Page (optional)...

TOTALS This Period (last page in this line only)...

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3)

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

Supplementary for
Information found on
Page 14 of Schedule C

NAME OF COMMITTEE (In Full) <i>William Tarbell Campaign</i>		FEC IDENTIFICATION NUMBER <i>C</i>
LENDING INSTITUTION (LENDER) Full Name <i>None N.A.</i>	Amount of Loan <i>[Blank]</i>	Interest Rate (APR) <i>[Blank]</i> %
Mailing Address	Date Incurred or Established M M / D D / Y Y Y Y	
City State Zip Code	Date Due M M / D D / Y Y Y Y	

A. Has loan been restructured? ☐ No ☐ Yes If yes, date originally incurred M M / D D / Y Y Y Y

B. If line of credit, Amount of this Draw: *[Blank]* Total Outstanding Balance: *[Blank]*

C. Are other parties secondarily liable for the debt incurred?
☐ No ☐ Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
☐ No ☐ Yes If yes, specify: *[Blank]*

What is the value of this collateral?
[Blank]

Does the lender have a perfected security interest in it? ☐ No ☐ Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? ☐ No ☐ Yes If yes, specify: *[Blank]*

What is the estimated value?
[Blank]

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).

Date account established:

M M / D D / Y Y Y Y

Location of account:

Address:

City, State, Zip:

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER Typed Name Signature	DATE M M / D D / Y Y Y Y
---	-----------------------------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature		Title	DATE M M / D D / Y Y Y Y
--	--	-------	-----------------------------

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 15 OF 15

FOR LINE NUMBER:
(check only one)

☐ 9
☐ 10

NAME OF COMMITTEE (In Full)

William Tarbell Campaign

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

None N.A.

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional) ...

2) TOTALS This Period (last page this line number only) ...

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

FEC Schedule D (Form 3) (Revised 02/2003)

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full)		Report Covering Period: From: <input type="text"/> / <input type="text"/> / <input type="text"/> To: <input type="text"/> / <input type="text"/> / <input type="text"/>	
Committee Name		(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
A			
B	Column Total Last Page Only.....		
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions
A			
B			
	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A			
B			
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts
A			
B			
	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A			
B			
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments
A			
B			
	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A			
B			
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements
A			
B			
	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A			
B			
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures
A			
B			

201605310200190956

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PAYMENT BY ACCOUNT (if applicable)

DELIVERY OPTIONS (Customer Use Only)

☐ SIGNATURE REQUIRED Note: The meter must check the "Signature Required" box if the meter:
1) Purchases Return Receipt Service, OR 2) Purchases additional insurance, OR 3) Purchases COD service, OR 4)
mail insurance or other secure location without attempting to obtain the addressee's signature on delivery.

☐ No Saturday Delivery (delivered next business day)

☐ Sunday/Holiday Delivery Required (additional fee, when available)

☐ 10:30 AM Delivery Required (additional fee, when available)

Refer to USPS.com or local Post Office for availability.

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Date Accepted (MM/DD/YYYY)

Time Accepted

Weight

bs.

ozs.

Flat Rate

Sunday/Holiday Premium Fee

Acceptance Employee Initials

Delivery Attempt (MM/DD/YYYY)

Time

Employee Signature

Delivery Attempt (MM/DD/YYYY)

Time

Employee Signature

Delivery Attempt (MM/DD/YYYY)

Time

Employee Signature

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United States Senate

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OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

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Date of Receipt

USPS FIRST CLASS MAIL _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED _____
Postmark
USPS PRIORITY MAIL 5/26/16
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

POSTMARK ILLEGIBLE ☐ NO POSTMARK ☐

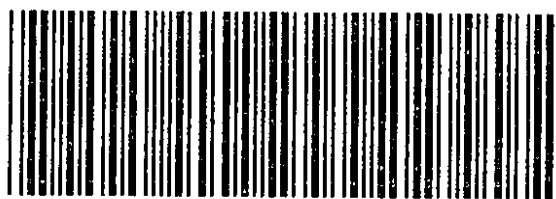
FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

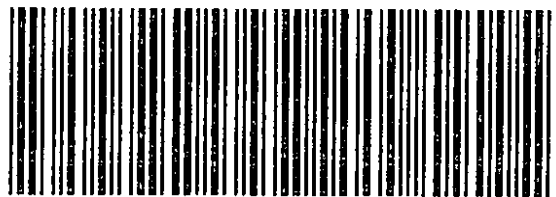
PREPARER MN DATE PREPARED 5/31/16

4/04/16

201605310200190958



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